Change in Company'	s premium	or rate	level	produced	bу	rate
Revision effective	07-3-08					

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3. 4. 5.	Liability Other Than Auto Burglary and Theft Glass	\$ 2,886,628	+ 6.6%
<b>6</b> .	Fidelity		
7. 8.	Surety Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		_
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Line of Insurance		
	es filing only apply to certain tasses? If so, specify:	erritory (territories) or c	ertain 
org Rev	ef description of filing. (If filing anization, specify organization ised Base Rates, Youthful Dr	n): iver, Rental Exposure,	Account Credit
	Increased Limits Factors fo	r the Personal Liabilit	y Umbrella
Pro	gram		······································
** CI	ljusted to reflect all prior rate changes. nanges in Company's premium level whicl sult from application of new rates.	h will	
	The Automobile In	nsurance Co. of Hartford, CT	
		Name of Company	
	Kein	J. M. L.	Vice President

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPE RECEINGED

SUMMARY SHEET

Form (RF-3)

Change in Company's premium or rate level produced by rate revision effective 08.894.81651515 u

JUL 2 9 2008

•	change in Company's promium or ra-		
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
••	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto	7,696,765	-12.0
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8. 9.	Boiler and Machinery Fire		
9. 10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail Other		
15.	Line of Insurance		
oes f	îling only apply to certain territory (	territories) or certain classes? If so, sp	pecify:
* A	description of filing. (If filing follow opting ISO Loss Costs - see expending and see that the second of the seco	es.	pecify organization):
			Great American Insurance
		_	Company of New York
			Name of Company
			Kelli Morress Product

Analyst

Official - Title

DIVISION OF INSUFANCE STATE OF ILLINOIS/IDEPE RECEIVED

JUL 2 9 2008

Form (RF-3)

SUMMARY SHEET

(	Change in Company's premium or rat	e level produced by rate revision effect	ive 08/01/08
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial	2.062.050	24.0
3.	Liability Other Than Auto	3,963,052	24.0
١.	Burglary and Theft		
5.	Glass		
ś.	Fidelity		
<i>'</i> .	Surety		
3.	Boiler and Machinery		
).	Fire		
).	Extended Coverage		
	Inland Marine		
2.	Homeowners		
١.	Commercial Multi-Peril		
ŀ.	Crop Hail		
5.	Other		
	Line of Insurance		
oes f		erritories) or certain classes? If so, spe	city.
ief o	description of filing. (If filing follow pting ISO Loss Costs - see exp	s rates of an advisory organization, spe lanatory	cify organization):
C	djusted to reflect all prior rate change hange in Company's premium level versult from application of new rates.	es. vhich will	
			Freat American Insurance
			Company of New York
			Name of Company
		ŀ	Kelli Morress, Product
		A	Analyst
		<u>-</u>	Official - Title

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

JUL 2 9 2008

Form (RF-3)

#### **SUMMARY SHEET**

(1) (2) Annual Premiu  Coverage Volume (Illinois	
Coverage Volume (minor	<u> </u>
1. Automobile Liability Private Passenger	
Commercial 2. Automobile Physical Damage Private Passenger	
Commercial 10.017 (01)	5.0
3. Liability Other Than Auto 19,217,621	-5.0
4. Burglary and Theft	
5. Glass	
6. Fidelity	
7. Surety	
8. Boiler and Machinery	
9. Fire	
Extended Coverage     Inland Marine	
Homeowners	
2 Commercial Multi Paril	
4 Cron Hail	
5. Other	
Line of Insurance	
pes filing only apply to certain territory (territories) or certain classes	
rief description of filing. (If filing follows rates of an advisory organ Adopting ISO Loss Costs - see explanatory	nization, specify organization):
Adjusted to reflect all prior rate changes.  Change in Company's premium level which will result from application of new rates.	
	Great American Insurance
	Company
	Name of Company
	Kelli Morress, Product
	Analyst

Form (RF-3)

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective			9-1-08 N / 11-1-08 R	
	(1) <u>Coverage</u>	Annual	2) Premium <u>(Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial			
2.	Automobile Physical Damage			
۵.	Private Passenger Commercial			
3.	Liability Other Than Auto		1,083,322	3.6%
4.	Burglary and Theft		· · · · · · · · · · · · · · · · · · ·	
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and Machinery		**************************************	
9.	Fire			
	Extended Coverage			
	Inland Marine			
	Homeowners	<del></del>		
	Commercial Multi-Peril Crop Hail			
	Other			
10.	Line of Insurance			
Doe	es filing only apply to certain territory (t	territories) or certai	n classes? If so, specify	. NO
	ef description of filing. (If filing follows rare adopting ISO Loss Costs, rules, revising L	•	•	•
	justed to reflect all prior rate changes. hange in Company's premium level wh		application of new rates	3.
			GuideOne Mutual Insurance	Company
	DIVISION OF STATE OF ILLI	INSURANCE NOIS/IDEBR	Scott Reddig, Chief Actuary	Name of Company
				Official - Title
	JUN30	2000		

#### Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	ange in Company's premium or rate leve	el produced by rate revision effective	9-1-08 N / 11-1-08 R
(1)		(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private		•
^	Passenger Commercial		
2.	Automobile Physical Damage		
3.	Private Passenger Commercial _ Liability Other Than Auto	148,629	-7.2%
3. 4.	Burglary and Theft	140,025	-1.470
<del>4</del> . 5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
_			
Do	es filing only apply to certain territory (te	rritories) or certain classes? If so, specify:	NO
		tes of an advisory organization, specify or	
We	are adopting ISO Loss Costs, rules, revising LC	M, Niche Multiplier, County Multiplier and misc ru	ıle changes.
			22.
*^	ljusted to reflect all prior rate changes.		
		ch will result from application of new rates	
C	nange in Company's premium level will	cit will result from application of new rates	•
		GuideOne Specialty Mutual I	nsurance
			lame of Company
		Scott Reddig, Chief Actuary	& SVP
		Goott Neddig, Office Actuary	Official – Title

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPS RECEIVED

JUN 3 0 2008

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial	5,358,363	0.1%
2.	Automobile Physical Damage Private Passenger		
	Commercial	1,486,278	0.1%
3.	Liability Other Than Auto	8,000,807	1.1%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	5,532,707	0.5%
10.	Extended Coverage	- I compared to the compared t	
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Ooes f N/A	iling only apply to certain territory (	erritories) or certain classes? If so, specify:	
Brief o	description of filing. (If filing follow	s rates of an advisory organization, specify of	organization):
Revis	se our package modification factors i	or Commercial Auto, Commercial Property	and General Liability lines
	isiness written under SICSC.		

\* Adjusted to reflect all prior rate changes.

DIVISION OF INSURANCE STATE OF ILLINOIS/IDFPR RECEIVED

JUL 14 2008

SPRINGFIELD, ILLINOIS

Selective Insurance Company of South Carolina (SICSC)

Name of Company

Tracy Potter – State Filing Specialist

Official - Title

H29219D

<sup>\*\*</sup> Change in Company's premium level which will result from application of new rates.

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial	1,143,997	0.0%
2.	Automobile Physical Damage Private Passenger		
	Commercial	312,468	0.0%
3.	Liability Other Than Auto	1,584,817	0.2%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	587,993	1.7%
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
oes f	iling only apply to certain territory (t	erritories) or certain classes? If so, specify:	
Brief (	description of filing. (If filing follow	s rates of an advisory organization, specify (	organization):
Revi	se our package modification factors f	or Commercial Auto, Commercial Property	and General Liability lines

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.



Selective Insurance Company of the Southeast (SICSE)

Name of Company

Tracy Potter – State Filing Specialist

Official - Title

## Section 754. Exhibit A Summary Sheet (Form RF-3)

#### Form (RF-3) SUMMARY SHEET

		y's premium o per 10, 2008	or rate level produced by rate r	revision	
	(1)		(2) Annual Premium	(3)	Percent
	<u>Coverag</u>	<u>e</u>	Volume (Illinois)*		Change (+ or -)**
1.	Automobile Liability				
	Private Passenger				
	Commercial				
2.	Automobile Physica	l Damage			
	Private Passenger				
2	Commercial	Auto	\$12,094	-	-2%
3. 4.	Liability Other Than Burglary and Theft	Auto	\$12,094		-2 /0
<del>-</del> . 5.	Glass				
6.	Fidelity			-	
7.	Surety				
8.	Boiler and Machine	ry			
9.	Fire				
	Extended Coverage	)			
	Inland Marine				
	Homeowners Commercial Multi-P	oril			
	Crop Hail	em			
	Other:			-	
		nsurance			
_					
			ory(ies) or certain classes?	No	
II S	o, specify:				
					1
			ows rates of an advisory		
	anization,specify org				
We	are revising our Exc	ess Layer Fa	ctors and Minimum Premiums		
	00100-11	0	rella + cheens		
	Justona	x amo	ulla + upcera		
*	Adjusted to reflect a	all prior rate cl	hanges		
**			ium level which will result from	n application o	f new rates.
			State Automobile	Mutual Insura	ance Company
				ne of Compan	
			C Deep Mafferd	III Conios A-4	tuarial Analyst
			C. Dean Mefford	official - Title	luanai Anaiyst
			· · · · · · · · · · · · · · · · · · ·		

## Section 754. Exhibit A Summary Sheet (Form RF-3)

#### Form (RF-3) SUMMARY SHEET

	Change in effective:	Company's premium of October 10, 2008	or rate level produced by rate revision	n 
		(1) Coverage	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
1.	Automobile Private Pa			
	Commerci	•		
2.		e Physical Damage ssenger		
3.		ther Than Auto	\$82,984	-2%
4.	Burglary a	nd Theft		
5. 6.	Glass Fidelity			
7.	Surety			
8.	•	Machinery		
9.	Fire			
	Extended		MANAGEMENT AND	
	Inland Mai Homeown			
		al Multi-Peril		
	Crop Hail			
15.	Other:			
		Line of Insurance		
	es filing only o, specify:		ory(ies) or certain classes? No	
org	anization,s	pecify organization):	ows rates of an advisory	
	person	ul umbaella	4 sheers	
**	Adjusted t	o reflect all prior rate c		ation of new rates.
			State Auto Property and Cas	sualty Insurance Company
			Name of C	
			C. Dean Mefford III, Se	nior Actuarial Analyst
			Official -	· Title

Form (RF-3)

	Change in Coeffective:	ompany's prei 11/08/200	mium or rate level prod 8	uced by rate revision	<u>.</u>
		(1) Covera	ge	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile L Private Pass				
2.	Commercial Automobile F Private Pass Commercial	Physical Dama enger	age		
3. 4. 5. 6.	Liability Othe Burglary and Glass Fidelity		(Contractors Plus)	\$14,749	-44.20%
7. 8. 9.	Fire		OF INSURANCE OF ILLINOIS/IDEFR OF ILLINOIS/IDEFR		
10. 11. 12. 13.	Extended Co Inland Marin Homeowners Commercial	d JU	L 2 8 2008		
13. 14. 15.	Crop Hail Other:	SPRING	RFIELD, ILLINOIS		
lf sc	s filing only ap	The -44.2%	territory(ies) or certain impact is on our Cont	classes? ractors Plus coverage only. On ou	ır overall General
Liab	ility book, the	impact is -0.2	%		
orga Ger Add	anization,speci neral Liability p	fy organizatio remium, subje and EPLI due	ect to a minimum premi	dvisory rs Plus rates from a "range of rate um of \$100. We also filed revised le also made some miscellaneous	rules for
*			rate changes. mium level which will re	esult from application of	
				State Auto Property & Casualty Name of Co	
				Matthew R State Regulato Official -	ry Analyst I

Say of the

Change in Company's	premium	or rate	level	produced	bу	rate
Revision effective	07-3-08					

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**		
1.	Automobile Liability Private Passenger Commercial				
2.	Automobile Physical Damage Private Passenger Commercial				
3. 4. 5.	Liability Other Than Auto Burglary and Theft Glass	\$ 2,199	+ 11.0%		
6.	Fidelity				
7.	Surety				
8.	Boiler and Machinery				
9.	Fire				
10.	Extended Coverage				
11.	Inland Marine				
12.	Homeowners				
13.	Commercial Multi-Peril				
14.	Crop Hail				
15.	Other				
	Line of Insurance				
Does filing only apply to certain territory (territories) or certain classes? If so, specify:					
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revised Base Rates, Youthful Driver, Rental Exposure, Account Credit					
and Increased Limits Factors for the Personal Liability Umbrella					
Program					
	* Adjusted to reflect all prior rate changes. ** Changes in Company's premium level which will				

Travelers Commercial Insurance Company

Name of Company

Vice President

<sup>\*\*</sup> Changes in Company's premium level which will result from application of new rates.

	inge in Company's premium or ratision effective 07-3-08	e level produced by rate		
	(1)	(2) Annual Premium	(3) Percent	
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>	
1.	Automobile Liability Private Passenger Commercial			
2.	Automobile Physical Damage Private Passenger Commercial			
3. 4. 5. 6.	Liability Other Than Auto Burglary and Theft Glass Fidelity	\$ 183,208	+ 6.6%	
7. 8. 9.	Surety Boiler and Machinery Fire			
10. 11.	Extended Coverage Inland Marine			
12. 13. 14.	Homeowners Commercial Multi-Peril Crop Hail			
15.	Other Line of Insurance			
	es filing only apply to certain te sses? If so, specify:	rritory (territories) or c	ertain	
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revised Base Rates, Youthful Driver, Rental Exposure, Account Credit				
and Increased Limits Factors for the Personal Liability Umbrella				
Program				
** CI	ljusted to reflect all prior rate changes. nanges in Company's premium level which v sult from application of new rates.	vill		
The Travelers Home and Marine Insurance Company				
		Name of Company		
	Tana a	m. Sandy	Vice President	

Change in Company':	s premium	or rate	level	produced	bу	rate
Revision effective	07-3-08					

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**		
1.	Automobile Liability Private Passenger Commercial				
2.	Automobile Physical Damage Private Passenger Commercial				
3. 4. 5.	Liability Other Than Auto Burglary and Theft Glass	\$ 167,115	+ 11.1%		
6. 7.	Fidelity Surety				
8. 9. 10.	Boiler and Machinery Fire Extended Coverage				
11. 12.	Inland Marine Homeowners				
13. 14.	Commercial Multi-Peril Crop Hail				
15.	Other Line of Insurance				
Does filing only apply to certain territory (territories) or certain classes? If so, specify: No					
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revised Base Rates, Youthful Driver, Rental Exposure, Account Credit					
and Increased Limits Factors for the Personal Liability Umbrella					
Program					
* Adjusted to reflect all prior rate changes.  ** Changes in Company's premium level which will result from application of new rates.					
	The Travelers Inde	emnity Company of America			

Name of Company

Official - Title

	(1.4. 0)	COMMUNICATION CELET	
	ange in Company's premium or ra vision effective 07-3-08	te level produced by rate	
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$ 181,805	+ 11.8%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	es filing only apply to certain te sses? If so, specify:	erritory (territories) or ce	rtain
org	ef description of filing. (If filing anization, specify organization ised Base Rates, Youthful Dri	):	•
	Increased Limits Factors for		
	gram	the rerponar manificy	OWDICIIA
	fjusted to reflect all prior rate changes.	10.	
** C	hanges in Company's premium level which sult from application of new rates.	will	

Name of Company

Travelers Personal Insurance Company

Vice President

	,				
	inge in Company's premium or ratision effective 07-3-08	te level produced by rate			
	(1)	(2) Annual Premium	(3) Percent		
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>		
1.	Automobile Liability Private Passenger Commercial				
2.	Automobile Physical Damage Private Passenger Commercial				
3. 4.	Liability Other Than Auto Burglary and Theft	\$ 725,151	+ 7.6%		
5. 6.	Glass Fidelity				
7. 8.	Surety Boiler and Machinery				
9. 10.	Fire Extended Coverage				
11. 12.	Inland Marine Homeowners				
13.	Commercial Multi-Peril				
14. 15.	Other				
	Line of Insurance				
	es filing only apply to certain te sses? If so, specify:	erritory (territories) or co	ertain		
org	ef description of filing. (If filing anization, specify organization ised Base Rates, Youthful Dri	):			
and Increased Limits Factors for the Personal Liability Umbrella  Program					
	<u> </u>				
** C	ljusted to reflect all prior rate changes. nanges in Company's premium level which sult from application of new rates.	will			
	Travelers Property Casualty Insurance Company				
		Name of Company			

Vice President